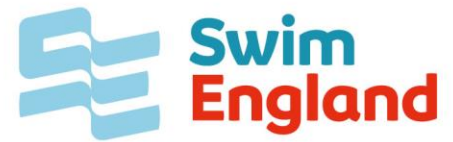


LICENCE NUMBER:

4EM20**0123**



PROMOTER'S REPORT FORM TO REGIONAL LICENSING OFFICER

MEET	Nottinghamshire Sports Centre League
CLUB	N/A
VENUE (Pool & Town)	Hucknall LC
DATE	01/01/2020
ORGANISER	Arnold Swimming Club
NAME & CONTACT DETAILS OF REFEREE	Joe Bloggs, Reg.: 1234567 No.: 07123456789

CHECK REQUIRED	TICK	COMMENTS
Promoter briefed by pool staff prior to meet	✓	
Please indicate any problems encountered which may have influenced the smooth flow of the competition or reasons for exceeding the daily limit.		N/A

Computer results e-mailed to rankings@swimming.org or asrankings@yahoo.co.uk + copy of results in document format. (Please send complete Sportsystems folder zipped)	Date & Time:
Full list of all technical officials enclosed with this form, to include their duties at the meet.	Enclosed
Meet entry summary printout or if not available copy of programme	Already Issued
Cheque for levy payable to Region OR Date of BACS payment (delete as applicable)	Leve 4 Levy Paid
Date sent to Regional Licensing Officer	Date:

I confirm that the Licensing Criteria appropriate to this level of Licensed Meet were met.

Signature of person submitting report.....*Jo Smith*.....

PrintName.....**Jo Smith (Arnold SC)**.....

Date:**01/01/2020**.....